nation unless it displays a valid OMB control number

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
CLAIMS AS FILED - PART I					umn 2)	SMALL ENTITY			OR	OTHER THAN SMALL ENTITY	
	FOR	NUMBE	NUMBER FILED		NUMBER EXTRA		RATE	FEE		RATE	FEE
	C FEE FR 1.16(a))							s	OR		s
	AL CLAIMS FR 1.16(c))	10	minus 20	<u>.</u>			x s=		OR	x s=	
INDE	PENDENT CLAIN FR 1.16(b))		minus 3						OR	x s=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ s· =		OR	+ s =	
* If the difference in column 1 is less than zero, enter *0* in column 2.							TOTAL		OR	TOTAL	
If the difference in column 1 is less than zero, enter 0 in column z.											
CLAIMS AS AMENDED – PART II OR OTHER THAN											
(Column 1) (Column 2)			(Column 3)		SMALL E	NTITY	OR		ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	=		x s 25 =		OR	× s <u>50</u> =	
	Independent (37 CFR 1.16(b))		Minus	•••	=		x s 100=		OR	x s 200	
AMI		ATION OF MULTIPLE	E DEPENDE	NT CLAIM (37 CF	R 1.16(d))		+ s 180=		OR	+5360	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
							700 51 55			,	
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	AMENDMENT	Minus	**	=		x s 25 =		OR	× 50=	
	(37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	•	Minus	***	=		x s 100=		OR	× s 200=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1				R 1.16(d))		+ 5 180=		OR	+ 360	
FINAL CRESCRIPTION OF MOCH CO SET COST COST (C. C.)						!	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
								.	'		
υ		(Column 1) CLAIMS REMAINING AFTER		(Column 2) HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
₩ 	Total	AMENDMENT	Minus	PAID FOR	=	1	x s 25 =		OR	x s ざ O =	
N.	(37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	-	Minus	•••	=		× s 100		OR	x s 200	
AMENDMEN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ 5 180=	 	OR	+ 360	
<u> </u>	FIRST PRESENTATION OF MOETING DEFINITION OF THE PRESENTATION OF TH					j	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
a Kitha paterio policino 1 ie loss than the entry in column 2, write "0" in column 3.											
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, using gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.